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		13	رمط	/	Joanne Ryan	(Depositor's name)
<b>/9</b>			R/	your	re Ryan	(Signature)
		N. S.	ALL MAN OF THE PARTY OF THE PAR	0	March'16, 200	6 (Date)
APPLICATION NO.	FILING DATE	FIRST NAMED II		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/943,709	08/31/2001	Ol Brig Barnu		liott	BBNT-P01-139	2582
TLE OF INVENTION: SY	STEMS AND METHODS F	OR PATH SET-	UP IN A QUANTU	JM KEY DISTRIBUT	TION NETWORK	
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	)	\$0	\$1400	03/21/2006
EXAMINER SHERKAT, AREZOO		ART UNIT		CLASS-SUBCLASS	1	
		2131		380-278000		
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
<u>.                                    </u>	RESIDENCE DATA TO BE	DD INTTED ON T		•		
					signee is identified below, the	document has been filed for
(A) NAME OF ASSIGNE		(P)	) PESIDENCE: (C	ITV and STATE OD	ONTRYZOOG BABRAHA2	00000068 181945 099
BBN TECHNOLOGIES CORP.			Cambridg		A4 FB 4554	00.00 DA
lease check the appropriate a	assignee category or categorie	s (will not be pr	inted on the patent)	: 🗆 Individual 🗷	Corporation or other private	group entity Government
. The following fee(s) are e	nclosed:	41	. Payment of Fee(s)	):		
Issue Fee  Publication Fee (No sm		A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.				
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 18-1945 (enclose an extra copy of this form).			
a. Applicant claims SM	from status indicated above) IALL ENTITY status. See 37		☐ b. Applicant is	no longer claiming SM	AALL ENTITY status. See 37	CFR 1.27(g)(2).
he Director of the USPTO is OTE: The Issue Fee and Pu iterest as shown by the recor	s requested to apply the Issue blication Fee (if required) wi ds of the United States Paten	Fee and Publica I not be accepted and Trademark	tion Fee (if any) or d from anyone other Office.	to re-apply any previo than the applicant; a	ously paid issue fee to the appl registered attorney or agent; or	ication identified above. the assignee or other party in
Authorized Signature			Date March 16, 2006			6
	dward A. Gordo		<del></del>		ion No. <u>54,130</u>	
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